91.9"		ider the Paperwork Re				ated to tempored to 9 e	ovecoo e	Api Trader iedom	proved for eas t neck Office, U. action unless it	brough ( S. DEP/ Gentlers	97/31/2006. (X LIKTIMEENT (YS	58.06 (08-03) MG 0631-4032 COMPAERCE COMPAERCE
PASENT APPLICATION FEE DETERMINATION RECORD									dication or D		200 )	DN: 36-03
Subminute for Form PTO-875							SN	: 10/7	12,			
CLAIMS AS FILED - PART I (Column 1) (Column 2)					CMALL ENTITY AD				OTHER THAN SMALL ENTITY			
FOR NUMBER			R FILED	D NUMBER (		EXTRA	RATE		FEE		RATE	FEE
BASIC FEE (77 CPa I.MOD)							ss	OR		s		
107AE CEADAS 14 minus 20 = 0				0	×\$_	2-	•	OR	x \$ •			
DIDEFEIDENT CLADIS (17 CPR 1.14(0))  3 minus 3 **					0	z_44- 0				·		
MULTIPLE DEPENDENT CLADA PRESENT (DT CFR 1.14(4))						÷_	<u>0</u> _	0	OR	·		
● If the difference in column 1 in less then zero, cotor "O" in column 2							TO	AL	\$395	OR	TOTAL	
CLAIMS AS AMENDED - PART II (Cohuma 1) (Cohuma 3) (Cohuma 3)							SMA	ΠĐ	мііл	OR	OTHER TH	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	ER SLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (27 CFR 1.16(c))	• 15	Minus	** 20	)	•	25_	<u> </u>	0	ÓR	x\$=	
	Independent (37 CFR 1.14(1))	4	Minus	3		<b>-</b> 1	. 10	يجو	\$100	OR	ו	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLADA (77 CFR L14(4))						t_	<u>.                                    </u>	0	OR	÷	
	8 8 (Cotume 2) (Cotume 2)					(Column 3)	TOT ADDIT. F		\$100 '	OR <sub>A</sub>	TOTAL DÖIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	ER SLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total grafa LIG(d)	• 9	Minus	. 2	-0	- 0	x\$_	9	0	8	x\$=	
ME	Independent (27 CFR 1.16(h))	. 7	Minus	•••	J	- 0	. 4	4 -	0	OR	×=	
٧	FIRST PRESENTATION OF MIRTIPLE DEPENDENT CLAIM (7) CFR 1.14(6))						<u>  -</u>	<u>o</u> -	•	OR	· =	
	(Cohuma 1) (Cohuma 2) (Cohuma 3)						TOT ADDIT. F		\$0	OR	TOTAL DOIT. FEE	
AENT C	· .	CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOUS PAID FO	R SLY	PRESENT EXTRA	RA	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE

	A 10-7 / U (Column I)			(Cotumb 2)	(Coltamo J)	ADDIT. FEE			ADDIT. FEE		
NDMENT C		CLAIMS REMAINING AFTER AMENDMEN		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (27 CPL 1.14(2)	• 9	Minus	. 20	. <b>–</b> 0	]	x\$_9_	<b>○</b> •	OR	×\$=	
MEN	Independent (27 CFR 1,16(h))	• 1	Minus	<b>"</b> 3	- 0	4	**	•	OR	, ,	
7	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (3° CFR 1.1443)						••	•	OR	•	
	the cutry in column the "Highest Hunde	AĽ	TOTAL OCIT. FEE	50		TOTAL DOTT. FEE					

\*\* If the "Highest Number Previously Paid Fer" DI THOS SPACE is less than 20, exter "20".

\*\*\* If the "Highest Number Previously Paid Fer" DI THOS SPACE is less than 3, exter "20".

The "Highest Number Previously Paid Fer" DI THOS SPACE is less than 3, exter "20".

The "Highest Number Previously Paid Fer" DI THOS SPACE is less than 3, exter "20".

This collection of information is required by 37 CFR 1.14. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completes form to the USPTO. These will vary depending upon the included case. Any comments on the amount of time you require to complete this form auditor segmentions for reducing this burden, elseved be sent to the Chief Information Officer, U.S. Person and Tandemark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Parents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.